

PART B - FEE(S) TRANSMITTAL



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7590 03/28/2006

Steven G. Roeder
THE LAW OFFICE OF STEVEN G. ROEDER
5560 Chelsea Avenue
La Jolla, CA 92037

04/26/2006 CNEGA2 00000003 090E3E36

01 FC:1501 1400.00 DP
02 FC:1504 300.00 DP

03 FC:1501	FILING DATE 10-00-01	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/823,236		Hai Chi Nguy	Q01-1025-US1/11198.64	6324

TITLE OF INVENTION: MAGNETIC SHIELD FOR A RECORDING DRIVE

James P. Broder	(Depositor's name)
	(Signature)
April 21, 2006	(Date)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/28/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DAVIS, DAVID DONALD	2627	360-097020

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 James P. Broder
2 Steven G. Roeder
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Maxtor Corporation

Longmont, Colorado

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 6

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A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to credit any overpayment, to Deposit Account Number 50-1141 (enclose an extra copy of this form).

5. Change In Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date April 21, 2006

Typed or printed name James P. Broder

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